

County: Waukesha  
WATERS OF WESTMORELAND, THE  
1810 KENSINGTON DRIVE  
WAUKESHA 53188 Phone:(262) 548-1400  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/02): 245  
Total Licensed Bed Capacity (12/31/02): 245  
Number of Residents on 12/31/02: 177

Facility ID: 9390

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Ownership:  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 178

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%	
-----		-----				-----		-----	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	42.4		
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	40.7		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.8	More Than 4 Years	16.9		
Day Services	No	Mental Illness (Org./Psy)	20.9	65 - 74	7.9		-----		
Respite Care	No	Mental Illness (Other)	2.8	75 - 84	41.8		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.6	85 - 94	37.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	5.6	95 & Over	5.6	Full-Time Equivalent			
Congregate Meals	No	Cancer	4.5		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	14.7		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	16.9	65 & Over	93.2	-----			
Transportation	No	Cerebrovascular	9.0		-----	RNs	6.4		
Referral Service	No	Diabetes	12.4	Sex	%	LPNs	5.3		
Other Services	Yes	Respiratory	7.9		-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	4.5	Male	29.9	Aides, & Orderlies			
Mentally Ill	No		-----	Female	70.1	32.6			
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				
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Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Diem Resi- dents	Of All
Int. Skilled Care	1	6.3	324	1	0.7	136	0	0.0	0	18	100.0	174	0	0.0	0	0	0.0	0	0	0.0	20	11.3
Skilled Care	15	93.8	292	120	83.9	116	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	135	76.3
Intermediate	---	---	---	20	14.0	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	20	11.3
Limited Care	---	---	---	2	1.4	82	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	1.1
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	16	100.0		143	100.0		0	0.0		18	100.0		0	0.0		0	0.0		0	0.0	177	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
		-----							
Percent Admissions from:		Activities of		% Needing Assistance of		% Totally		Total	
				One Or Two Staff		Dependent		Number of Residents	
Private Home/No Home Health	5.5	Daily Living (ADL)	Independent						
Private Home/With Home Health	0.0	Bathing	0.6	81.9		17.5		177	
Other Nursing Homes	2.7	Dressing	6.2	83.1		10.7		177	
Acute Care Hospitals	89.0	Transferring	23.2	68.9		7.9		177	
Psych. Hosp.-MR/DD Facilities	0.8	Toilet Use	6.2	80.2		13.6		177	
Rehabilitation Hospitals	0.0	Eating	32.2	61.0		6.8		177	
Other Locations	2.0	*****							
Total Number of Admissions	255	Continence		% Special Treatments					
Percent Discharges To:		Indwelling Or External Catheter		7.9		Receiving Respiratory Care		11.3	
Private Home/No Home Health	9.0	Occ/Freq. Incontinent of Bladder		53.1		Receiving Tracheostomy Care		1.1	
Private Home/With Home Health	18.4	Occ/Freq. Incontinent of Bowel		35.0		Receiving Suctioning		1.7	
Other Nursing Homes	7.3					Receiving Ostomy Care		2.8	
Acute Care Hospitals	22.4	Mobility				Receiving Tube Feeding		2.3	
Psych. Hosp.-MR/DD Facilities	0.8	Physically Restrained		2.8		Receiving Mechanically Altered Diets		28.2	
Rehabilitation Hospitals	0.4								
Other Locations	9.0	Skin Care				Other Resident Characteristics			
Deaths	32.7	With Pressure Sores		11.9		Have Advance Directives		80.2	
Total Number of Discharges		With Rashes		7.3		Medications			
(Including Deaths)	245					Receiving Psychoactive Drugs		62.7	
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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities									
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	This Facility		Ownership: Proprietary		Bed Size: 200+		Licensure: Skilled		All Facilities	
	%		%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	72.7		81.9	0.89	80.4	0.90	84.2	0.86	85.1	0.85
Current Residents from In-County	80.8		83.1	0.97	83.5	0.97	85.3	0.95	76.6	1.05
Admissions from In-County, Still Residing	24.3		18.8	1.29	25.1	0.97	21.0	1.16	20.3	1.20
Admissions/Average Daily Census	143.3		182.0	0.79	101.8	1.41	153.9	0.93	133.4	1.07
Discharges/Average Daily Census	137.6		180.8	0.76	107.7	1.28	156.0	0.88	135.3	1.02
Discharges To Private Residence/Average Daily Census	37.6		69.3	0.54	34.2	1.10	56.3	0.67	56.6	0.67
Residents Receiving Skilled Care	87.6		93.0	0.94	89.6	0.98	91.6	0.96	86.3	1.02
Residents Aged 65 and Older	93.2		87.1	1.07	90.9	1.03	91.5	1.02	87.7	1.06
Title 19 (Medicaid) Funded Residents	80.8		66.2	1.22	68.5	1.18	60.8	1.33	67.5	1.20
Private Pay Funded Residents	10.2		13.9	0.73	18.7	0.54	23.4	0.43	21.0	0.48
Developmentally Disabled Residents	0.0		1.0	0.00	0.7	0.00	0.8	0.00	7.1	0.00
Mentally Ill Residents	23.7		30.2	0.79	38.5	0.62	32.8	0.72	33.3	0.71
General Medical Service Residents	4.5		23.4	0.19	16.9	0.27	23.3	0.19	20.5	0.22
Impaired ADL (Mean)	48.9		51.7	0.95	52.1	0.94	51.0	0.96	49.3	0.99
Psychological Problems	62.7		52.9	1.19	54.1	1.16	53.9	1.16	54.0	1.16
Nursing Care Required (Mean)	8.3		7.2	1.16	7.7	1.08	7.2	1.16	7.2	1.16